REGISTERED AGENT OFFICE USE ONLY STATEMENT OF APPOINTMENT (Section 106.022, F.S.) 02-06-12P01:25 RCVD Original Appointment Change of Appointment Change of Mailing Address Change of Physical Address **Registered Agent and Office Information** Name Telephone Street Address UNIVER SITY City Zip Code Mailing Address SAME City State Zip Code I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer. Signature of Registered Agent **Date** Former Registered Agent and Office Information (for changes only) Name Telephone Street Address City State Zip Code **Committee or Organization Information** Name of Committee or Organization IZENS FOR A BETTER FUTURE Street Address Telephone UNIVERSITY City Signature of Chairperson **Printed Name of Chairperson**